



WEST SHORE SCHOOL DISTRICT

507 Fishing Creek Road • P.O. Box 803 • New Cumberland, PA 17070-0803
www.wssd.k12.pa.us

APPLICATION FOR EMPLOYMENT — EXTRA DUTY POSITION(S)

PERSONAL DATA

Date of Application: _____

Full Name: Miss \ Ms. \ Mrs. \ Mr. _____
LAST NAME FIRST NAME MIDDLE INITIAL

Address: _____
STREET CITY STATE ZIP

Social Security Number: _____

Telephone Numbers: Home (_____) _____ Cell (_____) _____

Are there currently any pending criminal charges against you? Yes No

If YES, please explain: _____

POSITION

Specific position(s) for which you are applying: _____

School(s): _____

SKILLS RELATED TO POSITION

Outline your experience relevant to this position:

REFERENCES (Non-Relative, Minimum 2)

NAME POSITION ADDRESS TELEPHONE NO.

WORK EXPERIENCE - Please be sure to include all work experience in which you have had direct contact with children.
(attach additional pages if necessary)

Dates of Employment:		Name and Address of Employer:	
From:			
To:			
		Telephone Number:	Hourly Salary: \$
Your Title:			Worked with Children: <input type="checkbox"/> Yes <input type="checkbox"/> No
Work Performed:		Reason for Leaving:	
Name & Title of Supervisor:			

Dates of Employment:		Name and Address of Employer:	
From:			
To:			
		Telephone Number:	Hourly Salary: \$
Your Title:			Worked with Children: <input type="checkbox"/> Yes <input type="checkbox"/> No
Work Performed:		Reason for Leaving:	
Name & Title of Supervisor:			

Dates of Employment:		Name and Address of Employer:	
From:			
To:			
		Telephone Number:	Hourly Salary: \$
Your Title:			Worked with Children: <input type="checkbox"/> Yes <input type="checkbox"/> No
Work Performed:		Reason for Leaving:	
Name & Title of Supervisor:			

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be deemed necessary in arriving at an employment decision.

In the event of employment, I understand false, omitted, or misleading information given in my application or interview(s) may result in discharge; I also understand I am required to abide by all rules and regulations of the West Shore School District.

I understand I must provide a negative TB test (valid 90 days), Act 34, Act 114, and Act 151 background checks (valid one year after issuance) prior to employment by the District.

Signature _____ Date Submitted _____